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Advancing Healthcare With Deep Learning: Innovations In Medical Image Analysis

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Abstract

Image detection and classification is one of the most crucial and emergent areas in the image recognition and analysis. Detection and classification can be used for a variety of computer vision and digital image processing applications Deep Learning (DL) has demonstrated outstanding performance in tasks such as detection and classification, making it highly effective for medical image analysis in healthcare systems. By integrating DL techniques, researchers aim to address key challenges in the medical field–particularly in the analysis of medical images for accurate detection and classification.

In Medical image analysis, the detection and classification of MRI images are required for precise and accurate, as well as computationally efficient, image processing algorithms. The success of the image detection and classification depends on the reliability and accuracy of the processing of the MRI images. In this paper we proposed pre-processing, post processing for different MR based images. The pre-processing is image containing image acquisition, filtering the images, then we followed post-processing containing grey scale-based segmentation and classification using CNN.

In this paper, we propose the use of a dataset comprising T1-weighted, T2-weighted, and FLAIR MRI images for brain image analysis. The intensity values in these images are primarily influenced by the relaxation times associated with T1 and T2 sequences. The contrast levels vary between T1- and T2-weighted images, providing complementary information for accurate analysis.

We are proposed in this paper MR image detection and classification Using deep learning method that is the CNN. The proposed algorithm is calculated using accuracy, index of similarity (SI), Sensitivity and precision and also specificity are also calculated for better estimation to the proposed method.

Keywords: Deep learning, Medical Images, Image analysis, Convolutional neural networks, Accuracy, Similarity index, Precision, Sensitivity.

INTRODUCTION

Image classification involves the systematic grouping of images into categories based on their features. It was developed to bridge the gap between computer vision and human perception by training computers using labeled image data. The classification process assigns images to predefined categories by analyzing their content through computer vision techniques. Image processing includes analysing and manipulating the scanned image to improve its quality [1]-[16]. Various image processing techniques are applied to enhance image clarity and accuracy, thereby enabling more precise diagnosis. Different methods are provided for this purpose but the aim of this study is issues such as filtering, image segmentation, extraction or selection and classification of characteristics of the given image. These major methods will allow accurate detection of tumor MRI images in the brain [2]-[10].

MRI Image of the intensity value can be modulated and it is using different pulse types and image parameters. MRI does not use harmful radiation and offers enough information to diagnose the disease and allow the doctors to make decisions [3]-[18]. MRI images are used for human brain tumor tissue detection and disease diagnosis [4]-[17]. Various MRI imaging techniques are used in this procedure depending on the disease requirements and identification. The intensity values in brain MRI images are primarily influenced by the

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https://theaspd.com/index.php

relaxation times in T1- and T2-weighted sequences. The contrast levels differ significantly among T1-weighted, T2-weighted, and FLAIR images.

To understand the different types of MRI images, it is essential to explain the concepts of **TR** (Repetition Time) and **TE** (Echo Time), which are fundamental parameters in MRI pulse sequences. Both TR and TE are typically measured in milliseconds (ms). Repetition Time (TR) refers to the time between successive radiofrequency (RF) pulses, while Echo Time (TE) is the time interval between the application of the RF pulse and the peak of the echo signal.

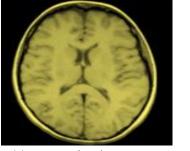
Table 1. Representation of Various Tissue Types across Different Medical Imaging Modalities

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Type of Tissues	T1-weighted	T2-weighted	FLAIR	
Cerebrospinal Fluid	Dark on	bright on T2	Very Dark	
White matter	Lighter on MRI	Darker on MRI	Lighter gray on MRI	
Cortex	Gray on MRI	Light gray on MRI	Light gray on MRI	
Fat (within bone)	Bright on CT	Light on MRI	Light on MRI	
Inflammation(impurity)	Dark (MRI&CT)	Bright (MRI&CT)	Bright on CT	

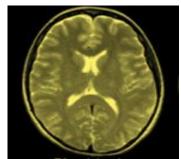
T1-weighted images [7]– [12] display cerebrospinal fluid (CSF) and other fluids as dark, with gray matter appearing darker than white matter. These images are particularly effective for visualizing brain structure and appear bright in regions with high fat content. T1 imaging uses short repetition time (TR \approx 500 ms) and echo time (TE \approx 14 ms), relying on longitudinal relaxation.

T2-weighted images [8]– [17], on the other hand, show CSF and fluids as bright, offering higher signal intensity than surrounding tissues. These images are acquired using longer TR (\approx 4000 ms) and TE (\approx 19 ms) values, based on transverse relaxation. T2-weighted imaging provides clear visualization of water content, making it ideal for detecting tissue edema.

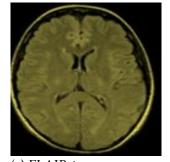
FLAIR (Fluid-Attenuated Inversion Recovery) images [10]–[15] are similar to T2-weighted images but suppress the bright signal from CSF, enhancing the visibility of abnormalities such as brain edema. While FLAIR offers excellent contrast for detecting lesions, it requires longer acquisition times due to extended TE and TR values [11]–[14].



(a) T₁-weighted image



(b) T₂-weighted image



(c) FLAIR image

Figure 1: Illustrates the different types of sequences used in MRI imaging

Process Of Image Processing And Analysis

In this paper we are provided image analysis methods is such as filtering, image segmentation, extraction or selection and classification of characteristics of the given input image. These major methods will allow accurate detection, classification of tumor MRI images in the brain [12].

ISSN: 2229-7359 Vol. 11 No. 18s, 2025

https://theaspd.com/index.php

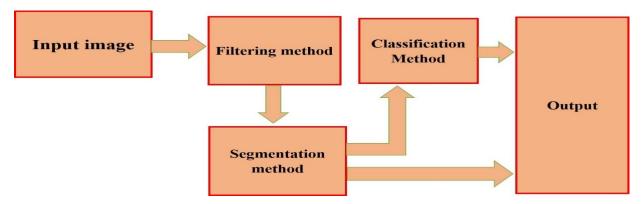


Figure 2: Image Processing and Analysis Methodology

In the above figure 2 there three stages of image evaluation and analysis of MRI images. The stages are filtration, denoising and segmentation and the classification. Image filtering and noise suppression are the initial steps in the pre-processing phase of image processing. Noise reduction is performed using various restoration techniques to eliminate distortions that may occur during image acquisition, transmission, or compression. This enhances the overall image quality, ensuring more accurate analysis and results.

In this paper, we propose a novel filtering technique called **AMFWMF** (Adaptive Median and Fixed Weighted Mean Filter), which combines the strengths of both adaptive median and weighted mean filters. Think of it as blending two cleaning tools—one smart enough to adapt to the mess, and the other precise in smoothing it out. The method operates in three phases: in the first phase, noise pixels are identified, much like spotting stains on a surface. In the second phase, edges within the image are detected, similar to tracing outlines to avoid erasing important details. Finally, in the third phase, the noisy pixels—especially those near the edges—are carefully restored to enhance image clarity [13].

Segmentation plays a crucial role in extracting meaningful information from an image. It involves dividing the image into regions that share similar characteristics or properties [14], typically by identifying and outlining boundaries within the image. This process is essential in medical imaging, where segmentation provides diagnostic insights. Common applications include organ measurement, cell counting, and predicting growth patterns based on extracted boundaries and temporal data.

Image segmentation in brain MRI is a complex task that involves isolating and removing normal brain tissues—such as gray matter, white matter, and cerebrospinal fluid—in order to accurately identify and segment abnormal regions like tumor tissue. Subsequent steps may also include skull stripping for more precise analysis.

2.1 Issues Faced in MRI Medical Image Segmentation

MRI medical image segmentation presents several challenges due to the complex nature of brain structures and variability in image quality.

Common issues include low contrast between different tissue types, intensity inhomogeneity caused by magnetic field variations, and the presence of noise or artifacts. Additionally, anatomical variability across patients and overlapping tissue boundaries make accurate segmentation difficult. Manual segmentation is time-consuming and prone to inter-observer variability, while automated methods often struggle to generalize across different datasets. These challenges highlight the need for robust, adaptive, and high-precision segmentation algorithms.

Some common issues are:

- The differences among major sensing modalities are further complicated by the complexity of human anatomy.
- Tumor tissue also exhibits this PVE characteristic, making accurate segmentation more challenging.

ISSN: 2229-7359 Vol. 11 No. 18s, 2025

https://theaspd.com/index.php

- Sensor noise, along with interference from associated electronic components, can degrade image quality by
 introducing unwanted signals. This affects the accuracy of medical image analysis, particularly in low-contrast
 or high-resolution imaging scenarios.
- The captured gray levels of different brain tissues are often very similar, making it challenging to distinguish between them.

Image segmentation plays a crucial role in accurately identifying tumor tissue. However, it is important to note that no universal algorithm exists for the segmentation of brain tumors, as their appearance and characteristics can vary widely.

Solutions:

- Multimodal Imaging Integration: Combine data from multiple imaging modalities (e.g., MRI, CT, PET) to provide complementary anatomical and functional information.
- Anatomical Priors: Use atlas-based or template-guided methods to incorporate prior knowledge of anatomical structures.
- Deep Learning Models: Employ data-driven models, particularly CNNs and transformers that can learn complex patterns across modalities and anatomical variations.

2.3 PROPOSED METHODOLOGY

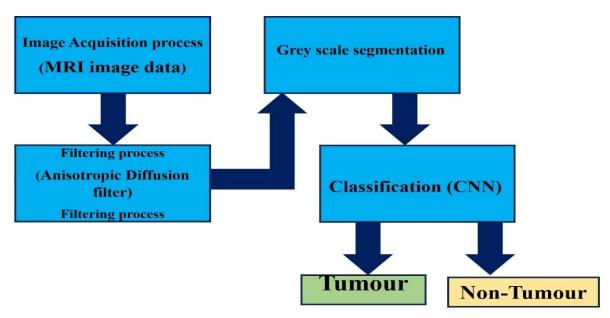


Figure 3: Proposed Methodology

The proposed system model is structured in two main phases: pre-processing and post-processing.

Pre-Processing Stage:

In this stage, MRI images are retrieved from the input database. Pre-processing is a critical step in image processing applications, particularly for segmentation tasks. The main objective of this phase is to reduce or eliminate noise from the images, thereby enhancing their quality for accurate analysis.

Magnetic Resonance Imaging (MRI) inherently contains a certain level of noise that must be addressed to ensure accurate analysis. However, noise reduction techniques should preserve image edges and maintain overall clarity and quality. Several methods exist for noise suppression, including the Gaussian filter [18], contour transformation approach, pulsation approach [14], average filter [15], and anisotropic diffusion filter [16]. In this work, we implement the **anisotropic diffusion filter** to effectively reduce noise in the input MRI images while preserving important structural details [17]. In pre-processing stage has two steps, one is MRI image data acquisition and second step is an applied filtering techniques for removing noisy and smoothing edges for extraction (by using Matlab2015b). Images are a collection of different data sets downloaded from

ISSN: 2229-7359 Vol. 11 No. 18s, 2025

https://theaspd.com/index.php

the Harvard Medical School website, the Zanjan Magnetic Resonance Center database, the OASIS dataset, and the ADNI dataset.

Perona and Malik [18] introduced an advanced technique known as the Anisotropic Diffusion Filter (ADF), which combines anisotropic diffusion and scale detection. This method addresses the limitations of traditional spatial filtering by effectively enhancing image quality while preserving object boundaries. ADF suppresses noise in homogeneous regions and retains edge sharpness, making it particularly useful in medical imaging. It is widely applied to enhance the quality of MRI images. However, its performance may be suboptimal when applied to images with varying noise levels, such as those reconstructed from sensitivity-encoded data or corrected for intensity inhomogeneity.

Steps for Anisotropic Diffusion Filtering Using 8-Connected Neighborhood Processing: -

- Step 1: Smoothing of the image or averaging
- Step 2: Noise removal in the image or better filtering
- Step 3: Clear and close curve Edge detection
- Step 4: Contrast enhancement is increased.

Post-Processing Stage:

In the proposed chapter some steps are considered in the given below:

Step 1: The filtered image is then passed on for grayscale-based segmentation.

Grayscale represents the average intensity of the red, green, and blue (RGB) values in each pixel. It includes a range of gray tones, where darker shades appear closer to black due to minimal light reflection, and lighter shades resemble white, resulting from high light reflection or transmission. The brightness of a grayscale pixel is directly proportional to the combined intensity levels of the primary colors.

Black is represented by RGB values of R = G = B = 0 (or in binary: 0000000), while white is represented by R = G = B = 255 (or 11111111 in binary). This grayscale representation, using 8-bit binary values, allows for 256 levels of gray ranging from black to white.

Step 2: Thresholding

Thresholding is one of the simplest and most commonly used methods for image segmentation. It works by dividing pixels based on their intensity values to create binary images—where each pixel is either black or white. This technique is typically used to highlight specific features of interest by rendering them white and setting all other regions to black, or vice versa. In a two-level thresholding process, a grayscale image is converted into a binary image to isolate the desired object. The primary purpose of thresholding is to extract and separate the target region from the background.

Step 3: Classification Using Convolutional Neural Networks (CNNs)

Convolutional Neural Networks (CNNs) are a type of multilayer feedforward artificial neural network, originally inspired by the structure and function of the visual cortex [16]. CNNs are a foundational component of deep learning and are widely used in image recognition tasks. They operate through two primary processes—convolution and pooling—which are applied in successive layers to progressively extract meaningful features from input images. Unlike traditional methods that rely on handcrafted features, CNNs automatically learn and extract relevant features, enabling high levels of accuracy in complex visual classification tasks.

2.4 Procedure for the Proposed System

There are generally two widely used methods to achieve this in image processing.

Using Grayscale: Grayscale processing converts an image into a spectrum of gray shades, from white to black. Each pixel is given a single intensity value reflecting its brightness, and these values are stored in an array for computational analysis.

Using RGB Values: In color image processing, each pixel is defined by RGB values—a mix of red, green, and blue components, each ranging from 0 to 255. These RGB values are extracted and stored in an array, enabling the computer to analyze and interpret the image.

Collection of Dataset

ISSN: 2229-7359 Vol. 11 No. 18s, 2025

https://theaspd.com/index.php

In this chapter, we utilize the CIFAR-10 dataset, which includes 60,000 images, each measuring 32×32 pixels. The dataset is divided into 10 distinct, non-overlapping classes, with each class containing 6,000 labeled images. The images are small, well-labeled, and free from noise, making the dataset well-suited for this task with minimal preprocessing required. Below are a few sample images from the dataset.

Pre-processing

To introduce some variability into the dataset, we first need to add noise, as the original images are highly organized and contain minimal distortion. Using MATLAB filtering techniques, we will artificially apply noise to the images. This will be done through a random combination of the following modifications:

- I Crop sections of the image
- I Flip the image horizontally
- I Modify hue, contrast, and saturation levels

Splitting dataset

In this step, calculating the gradient for the entire dataset can be time-consuming. To address this, we use mini-batches—small groups of images processed in each iteration of the optimizer. A typical batch size is 32 or 64; here, we use 64 due to the relatively large size of our dataset. The dataset is then split into two subsets: a training set and a test set, each containing a portion of the images.

2.5 Designing the CNN Architecture

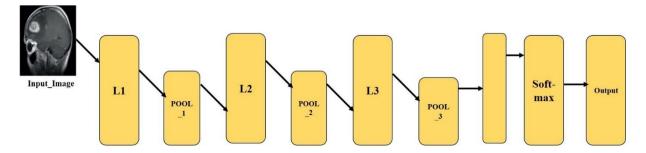


Figure 4: Proposed diagram using CNN system

With preprocessing complete and the dataset successfully split, we can now begin implementing the neural network. The model will consist of three convolutional layers, each followed by 2×2 max-pooling.

Max-Pooling is a technique used to downsample the spatial dimensions of an image by selecting the maximum pixel value within a defined grid or window. This not only reduces the computational load but also helps prevent overfitting, making the model more robust and generalizable.

After the convolution and max-pooling layers, we add two fully connected (dense) layers. Since fully connected layers require a two-dimensional input, and the output from the convolutional layers is four-dimensional, we insert a flattening layer to convert the data into the required format.

Finally, the last layer in the fully connected sequence is a **softmax layer**, which outputs the probability distribution across the different classes. Instead of processing the entire image in DICOM format at once, it is divided into smaller image tiles or slices. The CNN then analyzes each individual tile or slice, making predictions based on the content of each segment. These predictions are then aggregated, enabling the model to interpret the overall image by understanding its parts. This approach helps the computer not only identify objects within the image but also determine their precise locations.

Experimental Results And Analysis

The evaluation of the proposed methodology was measured in terms of precision, accuracy, sensitivity, specificity, MSE and PSNR and compared to the performance of other classifiers in the same way. Here we compare the operation of the proposed approach, ie CNN, with traditional approaches such as fuzzy cluster formation and decision tree classification.

Vol. 11 No. 18s, 2025

https://theaspd.com/index.php

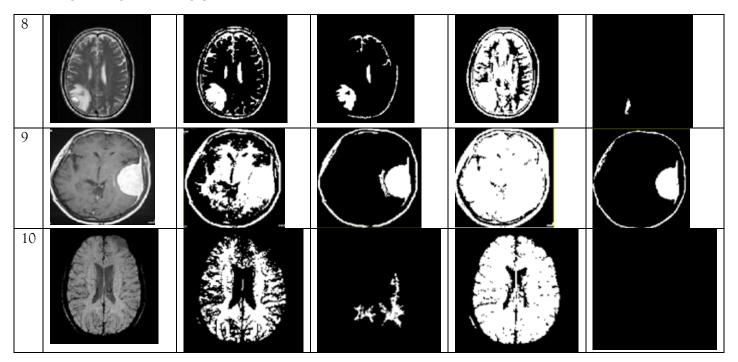
Table 2: Prediction Results

S N O	Input Image	Image Acquisition	Anisotropic Diffusion Filter	Grayscale Segmentation	Image Classification (Tumor or Non Tumor)
1					•
2					
3			A		A
4					***
5			6.0		
6					
7					

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Vol. 11 No. 18s, 2025

https://theaspd.com/index.php



3.1 Efficiency of the Classification Results

Similarity index, precision, sensitivity, specificity, and accuracy are essential evaluation metrics used to measure the performance of a classification model. These metrics help assess how well the model identifies true patterns, distinguishes between classes, and generalizes to unseen data.

The **formulas** for calculating each of these metrics, here they are:

Similarity Index =
$$\frac{2 \times |A \cap B|}{|A| + |B|}$$
 (1)

Sensitivity =
$$\frac{TP}{TP+FN}$$
 (2)

$$Precision = \frac{TP}{TP + FP}$$
 (3)

Accuracy
$$= \frac{TP + TN}{TP + FP + TN + FN}$$
(4)

Specficity =
$$\frac{TN}{TN + FP}$$
 (5)

Table 3: Performance Comparison Outcomes

Real dataset	image		Total parameter values				
		Classification Model	Precision	Accuracy	Sensitivity	Specificity	Similarity Index
		Proposed CNN	91%	92.45%	1%	71.0%	94.15%

ISSN: 2229-7359 Vol. 11 No. 18s, 2025

https://theaspd.com/index.php

MRI Image Set (100	Fuzzy clustering [17]	81%	87%	0.81%	69%	89%
Images)	Decision tree-based classification approach	83%	89.54%	0.78%	72%	91%

CONCLUSION

An experiment was conducted in this chapter to determine the tumor or non-tumor from MRI images. In this chapter, the better image filtering technique is used to improve image quality. Then the next step was the best image segmentation method is used to determine the image boundaries and extract the features for diagnostic knowledge. Our proposed approach can be described into three phases. The first phase is preprocessing that improves the brain's MRI image and makes it more suitable for analysis. The second phase is, segmentation that separates the tumor area from the using advanced model. In the third phase, classification based on a deep learning system that provides an optimal classification for tumor or non tumor detection.

The proposed system model achieved superior performance in comparison to conventional methods used for brain tumor classification. Using an MRI dataset consisting of 10 images, the model achieved higher accuracy, precision, sensitivity, specificity, and similarity index. These metrics were also compared with those from existing traditional techniques. Overall, the proposed approach delivered superior classification performance relative to the traditional methods.

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